## LCr-AR1

## LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Format for Awarding Body that enforces its own Labor Compliance Program for some but not all projects

Report for the reporting period  $\frac{7/1/2010}{\text{(mm/dd/yyyy)}}$  to  $\frac{6/30/2011}{\text{(mm/dd/yyyy)}}$ 

1. Name of Labor Compliance Program (LCP): Red Bluff Union Elementary School District		
2. LCP I.D. Number (assigned by DIR): 2009-00622	3. Date of Initial Approval: 12/29/2009	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available):  Rachel Bentley, Payroll Specialist rbentley@rbuesd.org  William McCoy, Superintendent wmccoy@rbuesd.org  Red Bluff Union Elementary School District (530)527-7200  1755 Airport Blvd. (530)527-9308 fax  Red Bluff CA 96080		
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period?  Please check one: Yes If Yes, proceed to item 6 on the next page  If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant,  455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102		
What suggestions do you have for the Department of Industrial Relations (necessary)	to better assist you with your program in the coming year? (attach additional sheets if	

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SUBMITTED BY:		
	William McCoy, Superintendent	August 31, 2011
Signature \	Name and Title	Date